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## \*BIBDATASHEET\*

Bib Data Sheet

CONFIRMATION NO. 6155

SERIAL NUMBER 10/032,378	FILING DATE 10/26/2001 RULE	CLASS 606	GROUP ART UNIT 3739	ATTORNEY DOCKET NO. HOOV 112
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## APPLICANTS

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## \*\* CONTINUING DATA \*\*\*\*\*

This application is a CIP of 09/844,225 04/27/2001 PAT 6,517,536  
 which is a CIP of 09/747,609 12/22/2000 PAT 6,546,935  
 which claims benefit of 60/200,072 04/27/2000

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\* SMALL ENTITY \*\*

\*\* 02/01/2002

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY	SHEETS	TOTAL CLAIMS	INDEPENDENT CLAIMS
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after allowance	OH	35	18	4
Verified and Acknowledged	<i>R. Hollens</i> Examiner's Signature	Initials			

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## TITLE

Transmural ablation device with integral EKG sensor

FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )
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